PTO/SB/05	(03-01)

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## Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Zip Code

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Attorney Docket No. First Inventor Title Express Mail Label No.

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Assistant Commissioner for Patents

APPLICATION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Some Patent Application
See MPEP chapter 600 concerning utility patent application contents.	Washington, DC 20231
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status.	CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)      Nucleotide and/or Amino Acid Sequence Submission
2. See 37 CFR 1.27.	(if applicable, all necessary)
3. Specification [Total Pages 5]	a. Computer Readable Form (CRF)
<ul> <li>Descriptive title of the invention</li> <li>Cross Reference to Related Applications</li> </ul>	b. Specification Sequence Listing on:
<ul> <li>Statement Regarding Fed sponsored R &amp; D</li> </ul>	i. CD-ROM or CD-R (2 copies); or
<ul> <li>Reference to sequence listing, a table,</li> </ul>	ii. 🔲 paper
or a computer program listing appendix - Background of the Invention	c. Statements verifying identity of above copies
- Brief Summary of the Invention	ACCOMPANYING APPLICATION PARTS
- Brief Description of the Drawings (if filed)	<del></del>
- Detailed Description - Claim(s)	9. Assignment Papers (cover sheet & document(s)) 37 CFR 3 73(b) Statement Power of
- Abstract of the Disclosure	10. 37 CFR 3.73(b) Statement Power of Attorney
4. Total Sheets 2 ]	11. English Translation Document (if applicable)
5. Oath or Declaration [ Total Pages ]	12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
a. Newly executed (original or copy)	13. Preliminary Amendment
b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)
named in the prior application, see 37 CFR	16. Nonpublication Request under 35 U.S.C. 122
1.63(d)(2) and 1.33(b).	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
6 Application Data Sheet. See 37 CFR 1.76	17. Other:
18. If a CONTINUING APPLICATION, check appropriate box, and supply or in an Application Data Sheet under 37 CFR 1.76:	the requisite information below and in a preliminary amendment,
Continuation Divisional Continuation-in-part (CIP)	of prior application No
Prior application information: Examiner	Group Art Unit.
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the I Box 5b, is considered a part of the disclosure of the accompanying continuat The incorporation can only be relied upon when a portion has been inadverted.	prior application, from which an oath or declaration is supplied under ion or divisional application and is hereby incorporated by reference.
19. CORRESPONDEN	
Customer Number or Bar Code Label (Insert Customer No.: or Attach bar ex	or Correspondence address below
Name Donald A Smith	
2020 W 1500 S	

Registration No. (Attorney/Agent) Name (Print/Type)

State

Telephone

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Complete if Known

Application Number
Filing Date
First Named Inventor
Examiner Name
Group Art Unit
TOTAL AMOUNT OF PAYMENT

(\$) \$10.00

Attorney Docket No.

7 Tubility Doublette.											
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)							
Check	Credit	card	Money C	Other None	3. ADDITIONAL FEES						
	Account:		Order -	_	Large	Large Entity  Small Entity					
Deposit	10000				Fee	Fee	Fee		Fee Description	Fee Paid	
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Deposit											
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			zed to: (check all that	,	139	130	139	130	Non-English specification		
Charge fee	• •			ny overpayments	147	2,520		2,520	For filing a request for ex parte reexamination		
			) during the pendency		112	1.	l	920*	Requesting publication of SIR prior to		
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to the aboveid					113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
4 DAGIO E			LCULATION		115	110	215	55	Extension for reply within first month		
1. BASIC F				1	116	400	216	200	Extension for reply within second month		
Fee Fee	Fee Fe	е .	Fee Description	'	117	920	217	460	Extension for reply within third month		
Code (\$)	Code (\$)			Fee Paid	118	1,440	218	720	Extension for reply within fourth month		
101 740	201 370		Utility filing fee	510-	l	1,960	228		Extension for reply within fifth month		
106 330	206 165		Design filing fee		119	320		160	Notice of Appeal		
107 510	207 255	-	Plant filing fee		120	320	220	160	Filing a brief in support of an appeal		
108 740	208 376		Reissue filing fee		121	280	221	140	Request for oral hearing		
114 160	214 8	0	Provisional filing fee		ı	1,510		1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 270 -			140	110	240	55	Petition to revive - unavoidable				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			1	1,280		640	Petition to revive - unintentional				
		,		from Fee Paid	1	1,280	242	640	Utility issue fee (or reissue)		
Total Claims		-20**		=	143	460	ļ		Design issue fee		
Independent Claims		- 3**	=	=	144	620	244	310	Plant issue fee		
Multiple Deper	ndent			=	122	130	122	130	Petitions to the Commissioner		
					123	50	123	50	Processing fee under 37 CFR 1.17(q)		
Large Entity Fee Fee		<u>ntity</u> Fee	Fee Description	,	126	180	126	180	Submission of Information Disclosure Stmt		
Code (\$)	Code		- AN PRANTIMIET	· I	581	40	581	40	Recording each patent assignment per		
103 18	203	9	Claims in excess of	i <b>20</b>		ļ			property (times number of properties)		
102 84	1	42	Independent claims		146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))		
104 280	1	140	Multiple dependent		149	740	249	370	For each additional invention to be		
109 84	209 4	42	** Reissue indepen over original pate			I			examined (37 CFR § 1.129(b))		
110 18	210	9	** Reissue claims in		179	740	279	370	Request for Continued Examination (RCE)		
j	1		and over original	patent	169	900	169	900	Request for expedited examination		
		ond.	TOTAL (2)	<i>(4)</i>	Other	r fee (s	l necify	Λ	of a design application		
SUBTOTAL (2) (\$) Other fee (specify)											
**or numbe	r nrevious	by naid	if greater: For Reiss	ues see ahove	*Red	uced b	v Basi	ic Filina	Fee Paid SUBTOTAL (3) (\$)		

SUBMITTED BY		Complete (if	Complete (if applicable)		
Name (Print/Type)	Denoual A Smyla	Registration No. (Attorney/Agent)	Telephone	435-789-8457	
Signature	honald a Smith	•	Date	12-27-01	

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